FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1 (See instructions)														
			Office use only								_			
1. NAME OF COMMITTEE (i	n full)	(Check if name is changed)		nple: If typyi the lines	ng, type	12	2FE4	1M5		1				
Dedicated to	Establishing Nation	onal Teamwork	PAC (DE	NT PAC)									ш	
							ш	ш		ш	ш		ш	
ADDRESS (number an	d street)	S. Boulevard						ш		ш			ш	
X (Check if add	dress							ш		ш	ш		ш	$\Box$
is changed)	Tam	pa 		шш	Щ	L	FL	l		3360	6		ш	╝
COMMITTEE'S E-M.	AU ADDRESS		CITY					•		ZIP CODE ▲				
	bertwatkins.com													
IIWatkiiis@10	LI I I I I I			шш				ш		Щ	Щ		ш	$\sqcup$
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COMMITTEE'S WE	B PAGE ADDRESS (U	IRL)												
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2. DATE 0	M / D D / Y	2008												
3. FEC IDENTIFIC	ATION NUMBER	[	C C00	427930										
4. IS THIS STATE	MENT X NEV	V (N) OR		AMEN	DED (A)									
I certify that I have exar	nined this Statement and	·		d belief it is tr	rue, correct a	and cor	mplete							
Type or Print Name of	f Treasurer	Nancy H. Watkin	IS											
Signature of Treasure	er Electronically File	d by <b>Nancy H.</b>	Watkins			Date	9	<b>0</b> 2	/	07	/ Y	Ž	0 0	8 8
NOTE: Submission of	false, erroneous, or incor	nplete information ma	-		_					2 U.S.(	C. S43	<b>_</b> −		
Office Use Only				For further Federal Elec Toll Free 80 Local 202-6	tion Commi 0-424-9530	ission	ict:		F	FEC (Revise	FOR ed 02/2		1	

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